FORM D



1001502

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005

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FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

THOMSON FINANCIAL

MAY 04 2004

SEC USE ONLY
Prefix | Serial

DATE RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Sale of Convertible Promissory Notes and Warrants						
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Rule 4(6) ULOE						
Type of Filing: New Filing Amendment						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Nextec Applications, Inc.						
Address of Executive Offices (Number and Street, City, State, Zip (Telephone Number (Including Area Code)						
2611 Commerce Way, Vista, CA 92083 760-597-5700						
Address of Principal Business Operations (Number and Street, City, State, Zip (Telephone Number (Including Area Code)						
(if different from Executive Offices) same same						
Brief Description of Business:						
Nextec Applications, Inc. is engaged in the development, manufacture and sale of various products using certain fabric						
encapsulating technology.						
Type of Business Organization Corporation Dimited partnership, already formed						
☐ corporation ☐ limited partnership, already formed ☐ limited partnership, already formed						
other (specify)						
business trust limited partnership, to be formed formed						
Actual or Estimated Date of Incorporation or Organization: Mo Year 9 4						
☐ Estimated						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: FN for other foreign jurisdiction)						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

•	A. BASIC ID	DENTIFICATION DATA	
2. Enter the information requested for	or the following:		
• Each promoter of the issuer, if the	e issuer has been organized	within the past five years;	
 Each beneficial owner having the securities of the issuer; 	ne power to vote or dispo	se, or direct the vote or d	lisposition of, 10% or more of a class of equity
Each executive officer and director	or of corporate issuers and	of corporate general and m	anaging partners of partnership issuers; and
Each general and managing partner	er of partnership issuers.		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
The Endeavors Group LLC			
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)	
c/o Michael Cudahy, 9100 North Swan	Road, Milwaukee, WI 53	3224	
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
General Electric Pension Trust			
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)	
c/o GE Asset Management Incorporated	i, 3003 Summer Street, S	Stamford CT 06904, ATT	N: Gordon McGrath
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
J. P. Morgan Partners (SBIC), LLC			
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)	
c/o Shahan Soghikian J. P. Morgan Part	tners, 50 California Stre	eet, Suite 2940, San Fran	icisco, CA
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Fabric Partners			
Business or Residence Address (Number a	nd Street, City, State, Zip	Code)	
46155 Fairmount Boulevard, Hunting V	Valley, OH 44022		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Quantum Industrial Partners LDC			
Business or Residence Address (Number a		<i>'</i>	
c/o Aaron Bendikson, Soros Private Ed	quity Partners,888 Seve	nth Avenue, 32 nd Floor, 1	New York, NY 10106
Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)			·
Michael Cudahy			
Business or Residence Address (Number a	nd Street, City, State, Zip (Code)	
c/o The Endeavors Group LLC, 9100 No	orth Swan Road, Milwaul	kee, WI 53224	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA (CONT.)									
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual)									
Peter Ellman									
Business or Residence Address (Number an	nd Street, City, State, Zip	Code)							
2611 Commerce Way, Vista, CA 92083	***************************************								
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual)									
Aaron Bendikson									
Business or Residence Address (Number an	• • • • •	·	-						
c/o Soros Private Equity Partners, 88	8 Seventh Avenue, 32 nd J	Floor, New York, NY 101	06						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☑ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual) Walter L. Robb									
Business or Residence Address (Number ar	nd Street, City, State, Zip	Code)							
c/o Vantage Management, 300 Troy-Scho	• • • • • •	•							
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual) David Wiederecht			Mulagang Further						
Business or Residence Address (Number ar	nd Street, City, State, Zip	Code)	10.00						
c/o GE Asset Management Incorporated	3003 Summer Street St	tamford CT 06904							
Check Box(es) that Apply: Promoter	Beneficial Owner		☐ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual) Donald Duncan									
Business or Residence Address (Number an	nd Street, City, State, Zip	Code)							
2611 Commerce Way, Vista, CA 92083	•	,							
Check Box(es) that Apply: Promoter	Beneficial Owner		☐ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual)	-		Triumuging 1 at thei						
Christopher Pierson	-1 Charles City Charles 7in	0-1-)							
Business or Residence Address (Number at 2611 Commerce Way, Vista, CA 92083	nd Street, City, State, Zip	Code)							
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual)									
Business or Residence Address (Number at	nd Street, City, State, Zip	Code)							
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☐ Director ☐ General and/or Managing Partner						
Full Name (Last name first, if individual)			A MANAGEMENT OF THE PARTY OF TH						
Business or Residence Address (Number an	nd Street, City, State, Zip	Code)							

B. INFORMATION ABOUT OFFERING															
1.									Yes	No					
2.	What is	the minim	um invest	ment that v	vill be acce	epted from	any indivi	dual?					N/A		
3.	Does th	e offering	permit joi	nt ownersh	ip of a sing	gle unit?							Yes ⊠	No	
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									N/A					
Full Name (Last name first, if individual)															
Busi	ness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)			·					
Nam	ne of As	sociated R	roker or D	ealer											
11411.	Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers															
(C	heck "A	All States"	or check i	ndividual S	tates)						🗌 A	ll States			
_	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
_	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO	_	
-	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (Last name	first, if in	dividual)											
Busi	ness or	Residence	Address (Number ar	d Street, C	City, State,	Zip Code)								
Nam	ne of As	sociated B	roker or D	ealer											
State	es in Wl	nich Person	Listed H	as Solicited	or Intend	s to Solicit	Purchasers	5							
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
_	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]		
	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (Last name	first, if in	dividual)											
Busi	ness or	Residence	Address (Number ar	nd Street, C	City, State,	Zip Code)								
Nam	ne of As	sociated B	roker or D	ealer											
State	es in Wi	nich Person	n Listed H	as Solicited	d or Intend	s to Solicit	Purchasers	3							
(Check "All States" or check individual States)															
-	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
_	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
	MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount				
	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering,				
	check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	exchange and alleady exchanged.		A		A
	Type of Security	(Aggregate Offering Price	Δ	Amount lready Sold
	••		•		•
	Debt			Э <u>-</u>	
	Equity	\$	0	\$_	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)				265,000
	Partnership Interests	\$_	0	\$_	0
	Other (Specify):	\$_	0	\$_	0
	Total	\$_	500,000	\$_	265,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
,	Enter the number of accredited and non-accredited investors who have purchased securities in				
	this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504,				
	indicate the number of persons who have purchased securities and the aggregate dollar amount				
	of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
					Aggregate
		NI	ımber Investors		ollar Amount f Purchases
	A 19 17				
	Accredited Investors Non-accredited Investors				265,000 0
				ه ع.–	
	Total (for filings under Rule 504 only)	_		<u> </u>	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all				
	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12)	N/	A		
	months prior to the first sale of securities in this offering. Classify securities by type listed in				
	Part C – Question 1.			_	
	Type of offering		Type of	Do	ollar Amount
	71 0		Security	•	Sold
	Rule 505			\$_	
	Regulation A			\$_	
	Rule 504				
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the				
	securities in this offering. Exclude amounts relating solely to organization expenses of the				
	issuer. The information may not be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
				œ.	0
	Transfer Agent's Fees			\$_	0
	Printing and Engraving Costs		<u> </u>	\$_	0
	Legal Fees			\$_	25,000
	Accounting Fees			\$	0
	Engineering Fees			\$_	0
	Sales Commissions (specify finders' fees separately)		<u>Ц</u>	\$_	0
	Other Expenses (identify)			\$	0
	Total		🖂	\$_	25,000

	•				
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PI	ROCEEDS	<u> </u>	
	b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."			\$ <u>475,000</u>	<u> </u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.				
			ments to		
			fficers,		
			ectors &	Paymen	
			filiates	Othe	ers
	Salaries and fees	□ \$_	0	_ 🗆 \$	0
	Purchase of real estate	□ \$_	0	_ 🗆 \$	0
	Purchase, rental or leasing and installation of machinery and equipment	□ \$_	0	_ 🗆 \$	0
	Construction or leasing of plant buildings and facilities	□ \$_	0	_ 🗆 \$	0
	Acquisition of other businesses	□ \$_	0	_ 🗆 \$	0
	Payment of indebtedness	□ \$_	00	_ 🗆 \$	0_
	Working Capital	\$_	0	_ 🛭 \$ <u>475,</u>	000
	Other (specify):	□ \$_	0	_ 🗆 \$	0
	Column Totals	\$_	0	_ 🗆 \$	
	Total Payments Listed (column totals added)		⊠\$ <u>4</u>	75,000	,
					J4
	D. FEDERAL SIGNATURE				
foll	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the owing signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Express of its staff, the information furnished by the issuer to any non-accredited investor pursuant to	exchang	ge Commis	ssion, upon	written
ssu	er (Print or Type) \$ignature \		Date		
	tec Applications, Inc.	_	April 27,	2004	
	ne of Signer (Print or Type) Title of Signer (Print or Type)				
Ma	rk D. Kaufman Assistant Secretary				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)